

PART B—ISSUE FEE TRANSMITTAL

242-645
561-30

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| | |
|---|--|
| 1. CORRESPONDENCE ADDRESS <div style="text-align: right;">21M1/0321</div> <p>HAROLD W MILTON JR HOWARD AND HOWARD 1400 NORTH WOODWARD AVENUE SUITE 101 BLOOMFIELD HILLS MI 48304-2856</p> | 2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change) INVENTOR'S NAME Street Address City, State and ZIP Code CO-INVENTOR'S NAME Street Address City, State and ZIP Code <input type="checkbox"/> Check if additional changes are on reverse side |
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| | | | | |
|-------------------------------|--------------------|---------------------|------------------------------------|--------------------|
| SERIES CODE/SERIAL NO. | FILING DATE | TOTAL CLAIMS | EXAMINER AND GROUP ART UNIT | DATE MAILED |
| 08/673,200 | 06/27/96 | 023 | HECKER, S 2111 | 03/21/97 |

First Named Applicant: HOCHSTEIN, PETER A.

TITLE OF INVENTION: POWER SUPPLY FOR LIGHT EMITTING DIODE ARRAY

| | ATTY'S DOCKET NO. | CLASS-SUBCLASS | BATCH NO. | APPLN. TYPE | SMALL ENTITY | FEE DUE | DATE DUE |
|---|-------------------|----------------|-----------|-------------|--------------|----------|----------|
| 2 | 65.016-014 | 363-089.000 | K95 | UTILITY | YES | \$645.00 | 06/23/97 |

| | |
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| 3. Correspondence address change (Complete only if there is a change) | 4. For printing on the patent front page , list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed. <div style="margin-top: 10px;"> 1 <u>HOWARD & HOWARD</u> 2 _____ 3 _____ </div> |
|--|---|

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06/12/1997 LBERGER 00000029 08673200
01 FC:242 645.00 DP
02 FC:561 30.00 DP

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

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| (1) NAME OF ASSIGNEE: (2) ADDRESS: (CITY & STATE OR COUNTRY) | 6a. The following fees are enclosed: <input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Advance Order - # of Copies <u>10</u> 6b. The following fees should be charged to: DEPOSIT ACCOUNT NUMBER <u>08-2789</u> (ENCLOSE PART C) <input type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies _____ <input checked="" type="checkbox"/> Any Deficiencies in Enclosed Fees The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above. (Authorized Signature) <u>[Signature]</u> (Date) <u>5/8/97</u> NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office. |
|---|--|

A. ☒ This application is NOT assigned.
☐ Assignment previously submitted to the Patent and Trademark Office.
☐ Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.
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on May 7, 1997
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Linda R. Munroe

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1. CORRESPONDENCE ADDRESS

21M1/0321

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Publishing Division
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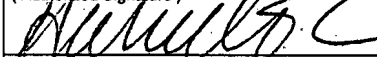
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(Authorized Signature)



5/7/97

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